## Application for Approval of a Course of Instruction

## **Home Care Agencies**

**INSTRUCTIONS:** Prepare all supporting documents in duplicate for each course for which approval is requested. Retain one copy for your files. The course may not be offered for credit towards the home care licensure requirements until notice of approval has been received from CDPHE. There is no charge for course approvals.

The application and supporting documents are to be mailed to:

Colorado Department of Public Health and Environment Health Facilities and EMS Division, Home Care Program 4300 Cherry Creek Drive South Denver, CO 80246-1530.

School Name:		Telephone Number	
Address:		· ,	
Address where instruction		Telephone Number	
will be given			
Course Developer Name:		Telephone	
		Number:	
Address			
Email:			
Course Instructor Name:			
Address:			
Title of course of instruction for which approval is requested:			
Delivery Method:	Provide a short description of t	he course of instruction to be included on the	
☐ Face to Face	CDPHE website:		
☐ Mail			
☐ Internet			
☐ Webcast			
☐ Audio Recording			
☐ Teleconference			
☐ Video			
☐ CD-ROM			

## The following information and exhibits must be submitted with the application:

<b>□</b> 1.	List of training objectives for the course. (List knowledge, understanding	igs, and specific skills a
	student should acquire or attain upon completion of the course.)	

☐ 2. Explanation stating for whom the course is intended.

	a sufficient detail to reveal its scope and sequence. The following ed for the courses main phases (subjects, units, topics or home study
☐ A. Title of each phase	
	ion of the content of each phase including knowledge, skills and dent should acquire or attain upon completion of each phase.
☐ C. Clock hours of instruc	ction, laboratory, or practicum required for each phase.
☐ D. References utilized for copyright.	or each phase including title, author, page numbers, publisher, and
☐ E. Explanation of how st	tudent progress and competencies will be evaluated for each phase.
☐ 4. Developer qualifications for o	developing the course of instruction.
☐ 5. Instructor qualifications for p	providing the course of instruction.
☐ 6. Course materials utilized. If	web based provide internet address and instructions to access.
Has this course of instruction been	approved for continuing education credits? ☐ Yes ☐ No
If yes, by whom?	
(Please attach approval letter)	
Signature of person responsible for	the development and/or presentation of the course material:
	Date:
Printed Name	
Internal use only	
☐ Approved	
☐ Denied	
Date	Reviewer Signature